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**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	ALAIA et al.	Examiner:	Elda G. Milef		
Application No.:	09/832,437	Art Unit:	3692		
Filed:	April 11, 2001	Docket No.	ARIBP017C1		
Title:	METHOD AND SYSTEM FOR CONTROLLING AN ELECTRONIC AUCTION DURING THE TRANSITION TO A CLOSED STATE				

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450,

exandria, VA 22313-1450 on:

, 2007.

TRANSMITTAL OF AMENDMENT D

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment **D** in response to Office Action mailed December 6, 2006 in the above-identified application.

The fee has been calculated as shown below.

CLAIMS	After Amd.	HP*	Extra	Small Entity			Large Er	tity
CLAIMS				Rate	Fee		Rate	Fee
Total	40	60	-0-	x \$25 = \$		OR	x \$50 = \$	
Independent	8	13	-0-	x \$100 = \$		OR	x \$200 = \$	
Multiple Dependent Claims				x \$180 = \$		OR	x \$360 = \$	
*HP = Highest previously paid			TOTAL FEE \$		OR	TOTAL FEE \$	-0-	

Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

		SMALL ENTITY			LARGE ENTITY	
	$\Box$	Rate	Add'l Fee		Rate	Add'l Fee
		x \$60 = \$		OR	x \$120 = \$	120.00
☐ Extension for Response within SECOND month		x \$225 = \$		OR	x \$450 = \$	
☐ Extension for Response within THIRD month		x \$510 = \$		OR	x \$1020 = \$	
☐ Extension for Response within FOURTH month		x \$795 = \$		OR	x \$1590 = \$	
Extension for Response within FIFTH month	П	x \$1080 = \$		OR	x \$2160 = \$	

Attorney Docket No.: ARIBP017C1 Application No.: 09/832,437 03/26/2007 SSESHE1 00000009 09832437

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685. (ARIBP017C1).
Enclosed is our Check No. <u>2882</u> in the amount of \$ <u>250.00</u> to cover Terminal Disclaimer Fee and extension of time fees.
Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.
Enclosed aresheets replacement drawings.
Please charge Deposit Account No. 50-0685 ( ARIBP017C1 ) in the amount of to cover the additional claim fee and/or extension of time fees.
If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 ( ARIBP017C1 ).
OTHER: Terminal Disclaimer
Respectfully submitted, VAN PELT, YI & JAMES LLP

Clover Huang

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